

Advanced practice registered nurse

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An **advanced practice registered nurse (APRN)** is a nurse with post-graduate education in nursing. APRNs are prepared with advanced didactic and clinical education, knowledge, skills, and scope of practice in nursing.^[1]

APRN defines a level of nursing practice that utilizes extended and expanded skills, experience and knowledge in assessment, planning, implementation, diagnosis and evaluation of the care required. Nurses practicing at this level are educationally prepared at the post-graduate level and may work in either a specialist or generalist capacity. However, the basis of advanced practice is the high degree of knowledge, skill and experience that is applied within the nurse-patient/client relationship to achieve optimal outcomes through critical analysis, problem solving and evidence-based decision making.

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Education, accreditation, and certification

APRNs demonstrate effective integration of theory, practice and experiences along with increasing degrees of autonomy in judgments and interventions. Intensive post-graduate education is designed to teach an APRN to use multiple approaches to decision-making, manage the care of individuals and groups, engage in collaborative practices with the patient or client to achieve best outcomes; provide a supportive environment for colleagues; manage the utilization of staff and physical resources; engage in ethically justifiable nursing practice; protect the rights of individuals and groups; engage in activities to improve nursing practice; develop therapeutic and caring relationships; fulfill the conduct requirements of the profession; act to enhance the professional development of self; and function in accordance with legislation and common law affecting nursing practice.^[2]

APRN education forms the basis of four recognized general areas of specialization:

- Nurse anesthetists (in the United States, certified registered nurse anesthetists or CRNAs)
- Nurse midwives (in the United States, certified nurse midwives or CNMs)
- Clinical nurse specialists (CNSs)
- Nurse practitioners (NPs)

Each nurse specialty, especially NPs, can have sub-specialties or concentrations in a specific field or patient population in healthcare. Each has a unique history and context, but shares the commonality of being an APRN.

While education, accreditation, and certification are necessary components of an overall approach to preparing an APRN for practice, these roles are regulated by legislation and specific professional regulation. This allows for prescribing and referral, insurance reimbursement, and admitting privileges to health care facilities. In the US, the licensing boards are governed by state regulations and statutes and are the final arbiters of who is recognized to practice within a given state. While APRNs are educated differently depending on their specific specialty, all APRNs are now trained at the graduate level and are required to attain at least a master's degree, generally a Master of Science in Nursing in their field of concentration.

In 2004, The American Association of Colleges of Nursing (AACN) in conjunction with the National Council of State Boards of Nursing (NCSBN) recommended that advanced practice registered nurses move the entry level degree to the doctorate level by 2015.^[3] Accordingly, all APRN training programs are recommended (but not required as of yet) to convert their master's degree to a Doctor of Nursing Practice degree by the year 2015. Although the American Association of Nurse Anesthetists approved this recommendation, it is not requiring program compliance until the year 2025.^[4]

The majority of programs will grant a DNP.^[3] Because 45% of the nurse anesthesia programs are located in schools of allied health, these programs will award a Doctor of Nurse Anesthesia Practice (DNAP). The DNP will be the direct-entry, minimum academic requirement for advanced practice registered nurses; it is a clinical/practice-based doctorate but because it is not the entry degree for the profession of nursing (which includes advanced practice registered nursing), it is a terminal degree.

Grandfather exception

The future DNP requirement will apply only to those who are not yet licensed and practicing as APRNs. Those currently licensed as APRNs will be permitted to maintain their current level of education and certification. Some APRNs who have been in the profession for many years have been grandfathered into continuing APRN practice and licensure even without a master's degree. For example, the first nurse practitioner program was created in 1965 by nurse educator Loretta Ford and physician Henry Silver at the University of Colorado as a non-degree certificate program. All of the early NP programs were established as certificate programs before transitioning them to master's degrees in the 1980s.^[5]

Every state has different laws, rules, regulations, licensing and certification requirements for advanced practice registered nurses, thus some states may not have a grandfather clause in their state board of nursing laws, in particular as it may relate to transferring a license from one State to another. The US National Council of State Boards of Nursing (NCSBN) continues to work on a collaborative multi-state compact

licensure agreement for advanced practice nurses to be able to work in multiple US states with a singular active home state license.^[6] There are on-going discussions on expanding that type of licensure nationally^{[7][8]} similar to the existing Nurse Licensure Compact for recognition of RN and LPN licenses.

Patient outcomes

Numerous studies have been conducted comparing the patient outcomes of care provided by APRNs and physicians. The conclusions reached indicate that outcomes of care by APRNs in collaboration with physicians is comparable, and in some instances better, than care by a physician alone. A recent systematic review concluded that APRN care is safe, cost-effective, and results in similar clinical outcomes and patient satisfaction as compared to care by physicians alone for the populations and in the settings included in the studies.^[9]

Terminal degrees

An APRN may earn a terminal degree in several ways. A terminal degree is generally a doctorate. In some fields, especially those linked to a profession (e.g., medicine, nursing, dentistry, law, optometry, architecture, pharmacy, social work, religious ministry, engineering, accounting, education, etc.), a distinction is to be drawn between a first professional degree, an advanced professional degree, and a terminal academic degree. A first professional degree is generally required by law or custom to practice the profession without limitation. An advanced professional degree provides further training in a specialized area of the profession. A first professional degree is an academic degree designed to prepare the holder for a particular career or profession, fields where scholarly research and academic activity are not the work, but rather the practice of a profession. In many cases, the first professional degree is also the terminal degree because usually no further advanced degree is required for practice in that field even though more advanced professional degrees may exist.

Examples of terminal degrees in research are:

- Doctor of Philosophy (Ph.D.)
- Doctor of Education (Ed.D.)
- Doctor of Science (D.Sc.)
- Doctor of Nursing Science (D.N.Sc., DNS)

Examples of terminal professional degrees in nursing are:

- Doctor of Nursing Practice (DNP)
- Doctor of Nurse Anesthesia Practice (DNAP)

Post-nominal initials

The specific titles, credentials, post-nominal initials, and so on, Advanced Practice Nurses utilize will vary greatly by country, state, license-type, academic degrees, and board certifications. A list of post-nominal initials include, but are not limited to:

- ACNP: Acute Care Nurse Practitioner
- AGACNP: Adult-Gerontology Acute Care Nurse Practitioner

- ANP: Adult Nurse Practitioner
- APHN: Advanced Public Health Nurse
- APRN: Advanced Practice Registered Nurse (Same as Advanced Practice Nurse)
- APN: Advanced Practice Nurse (Refers to the four recognized general areas of advanced professional specialization: CRNA, NP, CNM, and CNS)
- ARNP: Advanced Registered Nurse Practitioner (Refers to Nurse Practitioners in some US States)
- C or BC following a title: Certified or Board Certified (i.e., APRN-BC, WHNP-BC, PNP-BC, FNP-C, GNP-C, ANP-BC)
- CMCN: Certified Managed Care Nurse
- CNM: Certified Nurse Midwife
- CNS: Clinical Nurse Specialist
- CRNP: Certified Registered Nurse Practitioner
- CS: Clinical Specialist
- CRNA: Certified Registered Nurse Anesthetist
- DNP: Doctor of Nursing Practice (the terminal professional degree for APNs)
- FNP: Family Nurse Practitioner
- GNP: Gerontological Nurse Practitioner
- NNP: Neonatal Nurse Practitioner
- NP: Nurse Practitioner
- ONP: Oncology Nurse Practitioner
- PMHCNS: Psychiatric & Mental Health Clinical Nurse Specialist
- PMHNP: Psychiatric & Mental Health Nurse Practitioner
- PNP: Pediatric Nurse Practitioner
- PsyNP: Psychiatric Nurse Practitioner
- WHNP: Women's Health Nurse Practitioner

References

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3. Aacn - Dnp - Faqs (<http://www.aacn.nche.edu/DNP/DNPFAQ.htm>)
4. AANA - Home (<http://www.aana.com>)
5. ISPUB - Defining Nurse Practitioner Scope of Practice: Expanding Primary Care Services (<http://www.ispub.com/ostia/index.php?xmlFilePath=journals/ijanp/vol1n2/scope.xml>)
6. APRN Compact (<https://www.ncsbn.org/917.htm>)
7. A Closing Word: National Licensure for Nurses (http://www.nursingcenter.com/library/JournalArticle.asp?Article_ID=735867)
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External links

- Germany Network of Advanced Practice Nurses (<http://www.dnapn.de/>)
- Coalition of Advanced Practice Nurses of Indiana (<http://www.capni.org/>)
- Canadian Association of Advanced Practice Nurses (<http://www.caapn.com/>)

- Information about Advanced Practise Nurses by the Singapore Nursing Board (http://www.healthprofessionals.gov.sg/content/hprof/snb/en/leftnav/advanced_practice_nurse.html)

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